

PATENT APPLICATION

Attorney Docket No. D/A1690Q1

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: **POSITION ENCODER**

the specification and claims of which

☒ are attached hereto OR ☐ was filed on _____ as U.S. Application No. _____

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims.

I acknowledge the duty to disclose information which is material to the patentability as defined in Title 37, Code of Federal Regulations, §1.56.

I hereby claim priority benefits under Title 35, United States Code, §119 of any foreign or U.S. Provisional application(s) for patent listed below, and have also identified below any foreign application(s) or Provisional application(s) for patent having a filing date before that of the application on which priority is claimed:

Prior Foreign or U.S. Provisional Application(s)

(Number)

(Country)

(Day/Month/Year Filed)

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following registered practitioners to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Mark Costello	Reg. No. 31,342;	Eugene O. Palazzo	Reg. No. 20,881;
Ronald F. Chapuran	Reg. No. 26,402;	Elizabeth F. Harasek	Reg. No. 28,850;
Kevin R. Kepner	Reg. No. 32,145;		
Nola Mae McBain	Reg. No. 35,782;	Manuel Quiogue	Reg. No. 26,978

ADDRESS ALL CORRESPONDENCE TO:

**Patent Documentation Center
Xerox Corporation
100 Clinton Avenue South, Xerox Sq. 20th Floor
Rochester, New York 14644**

DIRECT TELEPHONE CALLS TO:

(name and telephone number)
**Manuel Quiogue
503-685-4229**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

DECLARATION AND POWER OF ATTORNEY, continued

Name of sole or first inventor: David D. Martenson

Inventor's Signature:

David D. Martenson

Date: 26 June 2003

Residence: 18655 South Redland Road, Oregon City, OR 97045

Citizenship: USA

Mailing Address:
(Same as above)

Name of second joint inventor: David L. Knierim

Inventor's Signature:

David L. Knierim

Date: 6/26/2003

Residence: 10305 S.W. Ashton Circle, Wilsonville, OR 97070

Citizenship: USA

Mailing Address:
(Same as above)

RECORDATION FORM COVER SHEET

U.S. DEPARTMENT OF COMMERCE
Patent and Trademark Office

PATENTS ONLY

Attorney Docket Number **D/A1690Q1**

To the Honorable Commissioner of Patents and Trademarks: Please record the attached original assignment document.

1. Name of Party(ies) conveying an interest:

David D. Martenson
David L. Knierim

2. Name and Address of receiving Party(ies):

Xerox Corporation

800 Long Ridge Road
P.O. Box 1600
Stamford
Connecticut
06904-1600

Additional name(s) of conveying party(ies)
attached? ☐ Yes ☒ No

Additional name(s) and address(es)
attached? ☐ Yes ☒ No

3. Nature of Conveyance:

☒ Assignment ☐ Merger
☐ Security Agreement ☐ Change of Name
☐ Other _____

Execution Date: June 26, 2003

4. Application number(s) or patent number(s):

If this document is being filed together with a new application, the execution date of the application is:

June 26, 2003

A. Patent Application No.(s)

B. Patent No.(s)

Additional numbers attached? ☐ Yes ☒ No

5. Name and Address of party to whom correspondence concerning document should be mailed:

Patent Documentation Center
Xerox Corporation
100 Clinton Avenue South
Xerox Square 20th Floor
Rochester, NY 14644

6. Total number of applications and patents involved = 1

7. Total Fee (37 CFR 3.41): \$ 40.00

☐ Enclosed
☒ Authorized to be charged to Deposit Account

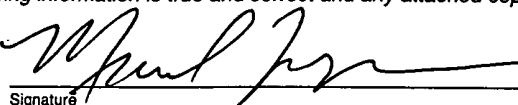
8. Deposit Account Number: 24-0025

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9. Statement and signature.

To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.

Name of Person Signing
Manuel Quiogue


Signature

Date June 26, 2003

Total number of pages comprising cover sheet **2**

Rev 01/2001